

# 2000

FORM

# 1-ES

## WISCONSIN ESTIMATED TAX VOUCHER

File only if submitting payment.  
 Make your check payable to and mail your voucher to:  
 Wisconsin Department of Revenue  
 Post Office Box 2942  
 Milwaukee, WI 53201-2942

Calendar year due dates:		Fiscal year filers:
Apr 17, 2000	Sep 15, 2000	Enter
Jun 15, 2000	Jan 16, 2001	year
		ending _____
		(month and year)

☐ Check box if address changed and new address was not provided on a prior payment voucher

Your last name	Your first name and initial	Your social security number	
Spouse's last name	Spouse's first name and initial	Spouse's social security number	
Home address (number and street or rural route)		Telephone number	
City or post office		State	Zip code

Check the boxes below which apply to you

- ☐ Trust (Enter FEIN as "your social security number")
- ☐ Estate (Enter decedent's social security number)
- ☐ Individual (or Joint)
- ☐ Extension or Electronic Return Payment

AMOUNT OF PAYMENT \$ \_\_\_\_\_

Please do not staple your payment to this voucher